아세안(ASEAN) 소비자의 미용 의료관광에 대한 방문의도와 영향요인 분석

강태욱

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Influence Factors of Visit Intention on Cosmetic Medical Tourism for ASEAN Consumers

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Abstract

This study was carried out to identify the key drivers behind the rapid growth of the cosmetic medical tourism industry in recent years and determine the future growth engines. Unlike previous studies that have focused on cosmetic medical tourism in the United States, Japan, and China, this paper examines the related trends in ASEAN countries, where the interest in cosmetic surgery has recently surged among young people, as part of the efforts to promote the expansion of the industry in this particular region.

The results of the empirical study showed that those from the ASEAN region traveling abroad for cosmetic surgery found the medical professional's expertise in cosmetic surgery technology, medical care system, and administrative convenience in relation to communication and accessibility appealing, and this is what led to an intention to visit. As for another process that formed the intention to visit, it was the sociocultural attitudes towards appearance arising from the attractiveness of celebrities, and this had an impact on the intention to visit abroad for cosmetic surgery.

Especially it was newly discovered, based on an empirical analysis, that sociocultural attitudes towards the appearance and attractiveness of celebrities could be a key influencing factor when it comes to the intention to visit another country for cosmetic surgery.

Keywords: ASEAN, Attractiveness of Celebrity, Cosmetic Medical Tourism, Sociocultural Attitudes towards Appearance, Subjective Knowledge

JEL Classifications: L80, L83

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I. Introduction

Recently, the medical tourism industry has been undergoing dramatic growth worldwide, as a future growth engine industry formed by the convergence of the medical industry and tourism industry, and efforts are being made on the national level to promote it in many countries. Medical tourism is defined as an activity to use medical services such as a health checkup, surgery, procedure, and treatment for the purpose of receiving disease treatment, cosmetic surgery, and so on at a medical institution outside one's own country (KTO, 2018). Medical tourists tend to spend more and stay longer compared to regular tourists, which is why the medical tourism industry has been growing as a high value-added industry, and its economic impacts are on the rise.

The demand for cosmetic surgery, in particular, among medical tourists has been growing steadily. In the past, cosmetic surgery was typically sought by affluent or high-income women or by those interested in self-display, but nowadays, the services are used for a wide range of purposes including personal care, image improvement, employment, and marriage. Also, with the growing awareness of cosmetic surgery, both young women and men are showing a great deal of interest in it (KOTRA, 2020).

Due to the nature of the tourism industry, there are limitations to growth with just the traditional travel business alone, and in order to attract more foreign tourists, merger with various other fields such as the cultural and medical industries is necessary. Previously, a number of studies concerning motivations for tourism have presented similar or only slightly different influencing factors, depending on the purpose or type of tourism such as leisure tourism, special tourism, and sports tourism, but there have been inadequate studies specifically focusing on motivations for medical tourism (Han Eun-Jin and Noh Jeong-Hee, 2013). Of particular note, research on cosmetic medical tourism has especially been lacking.

The vast majority of previous studies on medical tourism have been conducted on the medical tourism markets of China and Japan, while research on the Southeast Asian medical tourism market, exhibiting high remains growth potential, relatively insignificant. On the other hand, Southeast Asia, referred to as the ASEAN region, is expected to exhibit significant growth in the consumer goods market due to an abundance of consumers, rapid urbanization, growth of the middle class population, and development of the tourism industry (KOTRA, 2019), necessitating research on this particular market.

A factor that is motivating young people in Asia to come to Korea for cosmetic surgery is the growing popularity of Korean pop culture among young people in China, Japan, Hong Kong, Taiwan, Vietnam and others and the fact that they admire and try to emulate Korean celebrities (KTO, 2013). Korean dramas, for example, are aired in various countries in Southeast Asia, and as a result, those who develop an admiration of Korean celebrities and culture are motivated to visit Korea. As such, popular celebrities have a major influence on attracting tourists from other countries, and the admiration of their appearance is turning into a motivation to undergo cosmetic surgery, which in turn is being viewed as a new measure to create added value in the tourism industry (An Ji-Hyun and Jeong Chul, 2014).

Accordingly, in order to provide useful implications in relation to exploring and developing directions for the rapidly growing cosmetic medical tourism industry and to fill the gap in the research on the ASEAN market for cosmetic medical tourism, this study was carried out to determine the characteristics of cosmetic medical tourism, the study of which has been lacking, examine the cosmetic medical tourism industry based on the appeal of celebrities based on their attractiveness and appearance and the sociocultural attitudes towards appearance, and determine the level of awareness of cosmetic medical tourism. The ultimate aim is to pave the foundation for promoting the Korean cosmetic medical tourism industry in the future.

I. Theoretical Background

1. Measures of Cosmetic Medical Tourism

Cosmetic surgery refers to surgical operations performed to enhance one's appearance (Lee Hae-Hyung, 2013), and cosmetic medical tourism is a type of tourism where the aim is to receive cosmetic surgery or massage or spa services, etc. To be more specific, cosmetic medical tourism refers to tourist activities that involve experiencing cosmetic-related services that cannot be experience in one's home country or an act of receiving cosmetic medical services in a country known for excellent cosmetic surgery technology and procedures while engaging in tourist activities in parallel (Lim Bum-Jong, Yoon Byeong-Kug and Kwon Sung-Kil, 2009). Cosmetic surgery tourists can experience culture and the arts and engage in recreational, leisure, mentally and physically soothing activities among other tourist activities, while obtaining high-quality

cosmetic surgery services in a foreign country. Accordingly, based on previous research (Lee Ho-Gil and Lee Jeong-Cheol, 2010), the cosmetic medical tourism industry was identified to have largely three characteristics(physical environment, medical expertise, and administrative convenience).

1) Physical Environment

The physical environment, from the spatial and physical aspects, affects people's perceptions through sensory organs including visual, auditory, olfactory, and tactile senses. This influences the decision-making process in the final purchase environment, and the extent to which information is efficiently delivered affects the purchase decision made by customers. In the service industry, in particular, production and consumption occur simultaneously, and customers experience the overall service based on the physical environment, which influences their experience and perception (Lee Ji-Mi and Kim Ju-Duck, 2016). That is, at a hospital, for example, certain elements of the physical environment such as amenities serve to satisfy the diverse needs of users by providing them with convenience and services other than medical services (Oh Jae-Young, Kim Eun-Hye and Lee Seol-Joo, 2007). With respect to this, Andaleeb, Siddiqui and Klandakar (2007) found that physical external factors, information signs, and cleanliness of the hospital had a major impact on the level of user satisfaction, while Ji Kyung-Ja, Park Chun-Man and Lee Jong-Ryol (2011) found that the doctor's expertise, medical service, physical environment, medical facilities and equipment, and size of the hospital affected the intent to reuse the hospital services in said order. Choi Hwa-Yeol and Yoon

Byeong-Kug (2014), on the other hand, reported that the temperature and noise in a hospital were important factors affecting the mood or condition of patients and their caregivers as well as their level of satisfaction.

2) Medical Expertise

Medical expertise is an important factor that determines the extent to which patients can be helped and can increase the satisfaction of medical tourists. Thus, being staffed with excellent human resources with core competencies can be an important factor for a medical institution to gain a competitive advantage and survive the fierce competition. In this regard, Lee Choong-Ki, Ko Sung-Kyu and Kim Jin-Ok (2014) found that users evaluated hospital services primarily based on matters concerning the medical staff, in consideration of the special nature of hospitals, Choi Hwa-Yeol and Yoon Byeong-Kug (2014) reported that when it came to improving the quality of hospital services, the qualifications and attitudes of doctors and staff were most important. Mun Jun-Hwan, Jo Hye-Jung and Shin Seon-Jin (2017), on the other hand, explains that the services provided by medical service providers were an important determinant of medical service quality, with the increased level of service provided by medical institution staff in a rapidly changing medical service environment.

3) Administrative Convenience

Administrative convenience refers to the provision of general medical administration services to patients (Mun Jun-Hwan, Jo Hye-Jung and Shin Seon-Jin, 2017) based on the services and efforts of the organization (Kim Su-Bae and Seol Sang-Cheol, 2005) with the aim of minimizing the users' perceived time and effort spent. Administrative convenience can be an important factor in measuring the standard of medical services by users. Medical services require more time and effort from consumers than other services, so hospitals must have a convenient medical care system and ensure appropriate waiting time to keep their users satisfied (Yoon Sung-Wook, Ryu Jeong-Geon and Kim Su-Bae, 2006). Choi Hwa-Yeol and Yoon Byeong-Kug (2014) emphasized the need for hospitals to design a process that would make hospital users feel that they are being treated attentively and with care by excellent medical professionals and staff to ensure high levels of customer satisfaction Convenience is a concept that consists of accessibility, ease, communication, perceived quality, care, and tangibility, and it is an important factor in customer satisfaction. Accordingly, Kim Su-Bae and Seol Sang-Cheol (2005) carried out a study on users of medical services provided by university hospitals and found that among decision convenience, access convenience, transaction convenience, benefit convenience, and post-benefit convenience, all these factors, except for access convenience, had a positive impact on customer satisfaction.

2. Attractiveness of Celebrity

A celebrity is a person who has gained public recognition for his or her achievements in the area of specialty such as a film actor, sports player, entertainer, and politician. Through television, radio, sports games, concerts, elections, speeches, film festivals, fashion shows, and large-scale broadcasting events among others, celebrities demonstrate different characteristics from the general public, are known for their unique charms and lifestyles, quickly adapt to new trends, and enjoy high levels of fame. The reason a celebrity's every move becomes a hot topic nowadays is due to the increasing diversity of media such as the Internet and social media through which they become visible (Kim Jung-Ryum and Jun Jing-Woo, 2016; Rindova, Pollock and Hayward, 2008).

Previous studies regarding the attractiveness of celebrities have largely described attractiveness as physical attractiveness, professional attractiveness, social attractiveness. and marketing attractiveness, of which physical attractiveness is most easily apparent (Solomon and Saxe, 1977). There is a universal understanding that physical attractiveness naturally results in a halo effect, which leads to a positive perception of the person in question. Even in the field of physiognomy, it is widely believed that a person's appearance, especially the face, can shed light on his or her inner qualities, moral standards, and social skills (Hassin and Trope, 2000). Researchers explain that the attractiveness of the face has an important impact on one's social life, and an attractive face acts as a signal that provides important information to others (Penton-Voak and Perrett, 2000)

Furthermore, the attractiveness of celebrities may be more exposed than ever before due to the advancement of media. Celebrities seen in mass media not only have their appearances exposed but also their inner traits such as personal philosophy, way of thinking, and vision. Thus, people tend to gain information about the celebrity to a greater extent than they would of others. This increases their level of fame, instills trust in those who watch them, and clearly differentiates them from others (Kahle and Kim Chung-Hyun, 2006). As a result, those watch celebrities admire who their appearance, and celebrities in turn gain a more socially attractive image.

3. Sociocultural Attitudes towards Appearance

In the past, people were evaluated based on internal factors such as personality and character, but due to the appearance-oriented values of modern society, there is an increasing emphasis on physical attractiveness, and there has recently been a growing tendency to prioritize appearance. Sociocultural attitudes towards appearance refer to the stereotypes and sociocultural values with respect to appearance in the society under examination. In the case of women, for instance, an extremely skinny body is part of the feminine beauty ideal created by mass media such as television and magazines (Thompson and Heinberg, 1999).

These sociocultural influences are gradually being strengthened through mass media, and an increasing number of people are becoming deeply aware of the importance of social beauty ideals and appearance and internalizing them, as their own values. Due to such changes in sociocultural attitudes towards appearance, people are more conscious of their physical appearances and compare themselves with others, and their self-evaluations of their physical appearances have a significant impact on their body image, sense of self, clothing behavior, and appearance management behavior (Heinberg, Thompson and Stormer, 1995; Thompson and Heinberg, 1999)

Accordingly, Heinberg, Thompson and Stormer (1995) developed the Sociocultural Attitudes towards Appearance Questionnaire (SATAQ) consisting of measures of the degree of awareness and acceptance of the beauty standard forced upon by society. Prior studies carried out based on SATAQ showed that high levels of sociocultural interest in appearance had an impact on people's interest in appearance, appearance management behavior, inferiority complex in their appearance, satisfaction with their face, and satisfaction with their body (Lee Min-Ji, Chung Sung-Jee and Ahn Mi-Sun, 2015), and it led to a greater desire for cosmetic surgery (Jeon Hyun-Jin and Chung Myung-Sun, 2010).

4. Attitudes towards Cosmetic Medical Tourism

Cosmetic surgery refers to surgical procedures performed to enhance one's appearance, and it is a type of surgery performed at plastic surgery hospitals to make a person more beautiful (Lee Ji-Mi and Kim Ju-Duck, 2016). In a broad sense, it not only includes procedures that cause changes to the physical traits such as the eyes and nose but also other procedures enhancing one's appearance such as mold removal and filler and Botox injections (Lee Hae-Kyung, 2013). In addition, medical tourism is defined as "a combination of the functions of medical treatment and tourism for treating minor medical conditions and seeking sightseeing, shopping, cultural experiences and other forms of enjoyment while receiving medical treatment," It can be viewed as a new type of service that has arisen from combining medical and tourist services to cater to those visiting a foreign country for beauty care, plastic surgery, health checkup, minor operations, and so on (Kim Ki-Hong, 2010).

Based on this, Horiwitz and Rosensweig (2007) explained the most important reasons for traveling to underdeveloped countries for healthcare purposes among patients from developed countries as follows: the first reason is low-cost treatment; the second reason is to avoid the long wait to access healthcare, in the case of patients from the UK and Canada; the third reason is to obtain surgery and other medical services that are unavailable in their own country; the fourth reason is to obtain both medical and tourist services; and the fifth reason is to maintain personal privacy with guaranteed confidentiality. Lim Bum-Jong, Yoon Byeong-Kug and Kwon Sung-Kil (2009), on the other hand, explained that people travel abroad for medical services to access the latest medical technology, enjoy the convenience of the registration procedure, short waiting time, and better medical standard than that of one's home country, and avoid the high medical costs in their home country.

In order to promote cosmetic medical tourism, positive attitudes towards traveling abroad for cosmetic surgery is essential, as this attitude, once it is formed, can lead to an actual action. "Attitude" when it comes to purchasing behavior is arguably the most important concept affecting consumer behavior, and it can be defined as a learned tendency to act in a favorable and unfavorable manner towards a particular object (Schiffman and Kanuk, 2010). Accordingly, grasping the changes in the attitude of users can be an important factor in grasping the intention to visit another country for cosmetic surgery.

5. Visit Intention

Intention refers to the extent of one's willingness to choose a particular action or a plan or belief to achieve a certain purpose (Perugini and Bagozzi, 2001). It may be

defined as an attitude of a customer towards a certain object and the will and conviction that will manifest as consumer behavior in the future (Wu Shwu-Ing, 2006). The actual behavior may be determined by the attitude.

Fishbein and Ajzen (1975) reported that, in relation to behavior intention, when people make decisions on whether to perform a particular action, they reasonably assess the outcome of that action, and they are more likely to perform that action if they predict that the outcome will be positive. This is a planned consumer behavior for a specific future (Wang Yi-Shun, Lin Hsin-Hui and Luarn Pin, 2006), and a positive attitude has a direct and positive effect on behavioral intention (Oatley and Johnson-Laird, 1987), while an intention represents the probability of an attitude, belief, thought, or will being converted into action (Lin Judy Chuan-Chuan and Lu Hsipeng, 2000).

Based on this, it can be said that in order to grasp the decision-making processes of tourists, it is vital that their behavioral intention be understood (Lee Choong-ki, Ko Sung-Kyu and Kim Jin-Ok, 2014). Therefore, the visit intention is a concrete expression of a certain behavioral intention, and it refers to an acceptance intention that is premised on a favorable attitude. In other words, the visit intention is the extent to which one is willing to choose the action of visiting, and it is a plan or belief to achieve a certain purpose, which is the act of visiting (Choi Kyu-Whan, 2005). It could be viewed as a psychological decision (Jeong Chul, 2009) made based on attitudes towards а certain positive destination formed based on trust and evaluation, as a result of a positive or negative view of engaging in tourist activities in the future (Jeon Hee-Won and Park Hyun-Jae, 2017).

II. Research Method

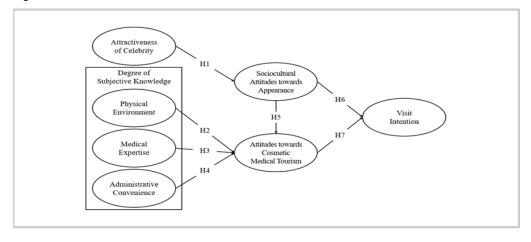
1. Research Model Design

In this study, in order to determine the effect of celebrity attractiveness and subjective knowledge of cosmetic medical tourism on the intention to visit a foreign country for cosmetic medical tourism, with the sociocultural attitudes towards appearance and the attitudes towards cosmetic medical tourism playing mediating roles, a research model, as shown in Fig. 1, was designed based on previous studies carried out by Choi Kyu-Whan (2005), Jang Dong-Suk (2016), Jeong Chul (2009), Oh Min-Jae (2018), Park Jung-Whan and Joo Hyun-Sik (2009) etc.

According to Theory of Planned Behavior(TPB), the following research model was established based on prior research that attitudes and subjective norms were correlated with execution behavior and purchase decision process(Ajzen, 1991).

The components of subjective knowledge of cosmetic medical tourism were divided into subjective knowledge of the physical environment, subjective knowledge of medical expertise, and subjective knowledge of administrative convenience in relation to cosmetic medical tourism. In addition, the role played by the sociocultural attitudes towards appearance and attitudes towards cosmetic medical tourism in the relationship between attractiveness of celebrities. subjective knowledge of the physical environment, subjective knowledge of medical expertise, and subjective knowledge of administrative convenience and the visit intention was examined.

Fig. 1. Research Model



2. Hypotheses

 Relationship between Attractiveness of Celebrities and Sociocultural Attitudes towards Appearance

Based on previous studies, Chung Mi-Sil (2012), Kim Su-Hyeon and Bae Hyun-Sook (2014), Roh Hye-Jung and Kim Eun-Yi (2011) etc., which explored the relationship between attractiveness of celebrities and sociocultural attitudes towards appearance, it was predicted that attractiveness of celebrities would influence sociocultural attitudes towards appearance, and the following hypothesis was established:

- H1: Attractiveness of celebrities will have a positive effect on sociocultural attitudes towards appearance,
- Relationship between Subjective Knowledge about Cosmetic Medical Tourism and Attitudes towards Cosmetic Medical Tourism

In this study, the components of subjective knowledge of cosmetic medical tourism were divided into subjective knowledge of the physical environment, subjective knowledge medical expertise, of and subjective knowledge of administrative convenience. Based on Chung Mi-Sil (2012), Kim Su-Hyeon and Bae Hyun-Sook (2014), Roh Hye-Jung and Kim Eun-Yi (2011) etc., prior studies that explored the relationship between subjective knowledge of cosmetic medical tourism and attitudes towards cosmetic medical tourism, it was predicted that subjective knowledge of cosmetic medical tourism would affect attitudes towards cosmetic medical tourism, and the following hypotheses were established:

- H2: Subjective knowledge of the physical environment in cosmetic medical tourism will have a positive effect on attitudes towards cosmetic medical tourism,
- H3: Subjective knowledge of the medical expertise in cosmetic medical tourism will have a positive effect on attitudes towards cosmetic medical tourism.

- H4: Subjective knowledge of the administrative convenience in cosmetic medical tourism will have a positive effect on attitudes towards cosmetic medical tourism,
- Relationship between Sociocultural Attitudes towards Appearance and Attitudes towards Cosmetic Medical Tourism

Based on, Lee Ho-Gil and Lee Jeong-Cheol (2010), Mun Jun-Hwan, Jo Hye-Jung and Shin Seon-Jin (2017), Seo Sang-Yun, Lee Jang-Woo and Lee Hoon-Young (2015), Yoon Sung-Wook, Ryu Jeong-Geon and Kim Su-Bae (2006) etc., prior studies exploring the relationship between sociocultural attitudes towards appearance and attitudes towards cosmetic medical tourism, it was predicted that sociocultural attitudes towards appearance would have an impact on attitudes towards cosmetic medical tourism, and the following hypothesis was established:

H5: Sociocultural Attitudes towards appearance will have a positive effect on attitudes towards cosmetic medical tourism,

Relationship between Attitude and Visit Intention for Cosmetic Medical Tourism

Based on the studies conducted by Ajzen (1991), Fishbein and Ajzen (1975) etc., to explore the relationship between attitude and behavioral intension, it was predicted that sociocultural attitudes towards appearance and attitudes towards cosmetic medical tourism would have an impact on the visit intention for cosmetic medical tourism, and

the following hypotheses were established:

- *H6: Sociocultural attitudes towards appearance will have a positive effect on the visit intention for cosmetic medical tourism.*
- H7: Attitudes towards cosmetic medical tourism will have a positive effect on the visit intention for cosmetic medical tourism.

Operational Definitions of Variables and Questionnaire Construction

Prior research on attractiveness of celebrities, subjective knowledge of the physical environment in cosmetic medical tourism, subjective knowledge of the medical expertise in cosmetic medical tourism, subjective knowledge of the administrative convenience in cosmetic medical tourism, sociocultural attitudes towards appearance, attitudes towards cosmetic medical tourism, and visit intention for cosmetic medical was examined develop tourism to operational definitions of variables, based on which a total of 21 measurement items were constructed

Studies by Dion, Berscheid and Walster (1972), Kim Jung-Ryum and Jun Jong-Woo (2016) etc. were referenced in regard to the attractiveness of celebrities, while studies by Han Sung-Hee (2019), Han Yong-Jun, Oh Kyeong-Seok and Lee Hoon-Young (2013), Kim Hye-Young, Youn Seung-Ho and Lim Sang-Taek (2019), Kim Min-Sook and Bang Ho-Yeol (2014), Kim Sa-Young (2013), Kim Su-Bae and Seol Sang-Cheol (2005), Kwag Dong-Hyun and Lee Byeong-Cheol (2019), Yang Jong-Hyun, Song Tae-Kyun and Chang

Dong-Min (2012), Yoon Sung-Wook, Ryu Jeong-Geon and Kim Su-Bae (2006) etc. were referenced with respect to subjective knowledge. In regard to the attractiveness of celebrities, three items were measured: (1) the degree to which the respondent believes the celebrity in question has a good sense of humor and wit, (2) the degree to which the respondent believes the celebrity in question has an attractive body and face, and (3) the degree to which the respondent believes the celebrity in question leads an attractive lifestyle.

With respect to the subjective knowledge of the physical environment in cosmetic medical tourism, the three items that were measured were: (1) the degree to which the respondent believes the medical institutions in the destination country are equipped with the latest medical equipment, (2) the degree to which the respondent believes the medical institutions in the destination country are sanitary, and (3) the degree to which the respondent believes the medical institutions in the destination country are equipped with amenities.

As for the subjective knowledge of the medical expertise in cosmetic medical tourism, the three items that were measured were: (1) the degree to which the respondent believes the medical professionals in the destination country are experts in their field, (2) the degree to which the respondent believes the medical professionals in the destination country possess excellent medical skills, and (3) the degree to which the respondent believes the medical professionals and staff in the destination country are hospitable.

In the case of the subjective knowledge of the administrative convenience in cosmetic medical tourism, the three items that were measured were: (1) the degree to which the respondent believes the administrative procedure necessary for visiting the destination country is convenient, (2) the degree to which the respondent believes the process of making an appointment at the medical institution in the destination country is convenient, and (3) the degree to which the respondent believes it is not inconvenient to engage in tourist activities in the destination country.

As for sociocultural attitudes towards appearance, studies by Kim Su-Hyeon and Bae Hyun-Sook (2014), Thompson et al. (2003) etc. were referenced, while in the case of attitudes towards cosmetic medical tourism, studies by Lam and Hsu (2004), Song Hak-Jun and Lee Choong-Ki (2010) and others were referred. Visit intention for cosmetic medical tourism was examined by referencing the studies by Jalivand and Samieo (2012a / 2012b), Kim Young-Ju and Kim Joo-Heon (2018), Kim Young-Mi (2018) etc. In the case of sociocultural attitudes towards appearance, the three items that were measured were: (1) the degree to which the respondent compares his/her physical appearance with that of TV stars and film actors, (2) the degree to which the respondent believes compares his/her appearance with that of a person whom he/she finds very attractive, and (3) the degree to which the respondent wishes to have the body of an idol star seen in a music video or that of a model in a magazine, etc.

In the case of attitudes towards cosmetic medical tourism, the three items that were measured were: (1) the degree to which the respondent believes cosmetic medical tourism is beneficial, (2) the degree to which the respondent believes cosmetic medical tourism is enjoyable, and (3) the degree to which the respondent believes cosmetic medical tourism is worth it.

As for the visit intention for cosmetic medical tourism, the three items that were measured were: (1) the degree to which the respondent intends to visit a cosmetic medical tourism destination country at a certain point in time in the future, (2) the degree to which the respondent is inclined to visit a cosmetic medical tourism destination country at a certain point in time in the future, and (3) the degree to which the respondent want to visit a cosmetic medical tourism destination country at a certain point in time in the future. For measurement purposes, a 5point Likert scale ranging from "Strongly disagree (1 point)" to "Strongly agree (5 points)" was used.

4. Research Subjects and Methods

This is an empirical study on the intention of consumers in the ASEAN region to visit outside one's own country for cosmetic medical tourism Data were collected from those who have had traveled abroad for cosmetic medical tourism in the past year from the Philippines, Malaysia, Singapore, Indonesia, Thailand, and Vietnam. The questionnaire was first composed in Korean and then translated into English, Chinese, Malay, Indonesian, Thai, and Vietnamese by current international medical tourism coordinators. To ensure the accuracy of the translations, they were translated back into Korean. After reviewing the questionnaire translated back into Korean, a preliminary survey was carried out both online and offline with 8 experts (professionals from the medical tourism industry) and 8 users (those who have traveled abroad at least three times for cosmetic medical tourism) over the course of 9 days from May 18 to 26, 2020. The questions were then supplemented, based on the feedback from the respondents. The questionnaires, which had undergone

two reverse translation procedures, was confirmed as the final measurement tool, and an online survey was conducted through E, a research company, and K, a medical tourism service provider, for 22 days from June 1 to 22, 2020 to collect data. Of the 308 questionnaires collected, a total of 300 questionnaires were used for the final analysis of this study, after excluding 8 questionnaires that were not suitable for data analysis. The SPSS 22.0 and AMOS 20.0 statistical programs, which are typically used in social science studies, were used for analysis.

IV. Empirical Analysis

1. General Characteristics of the Sample

The general characteristics of the sample are as follows: as for sex, they were mostly women, with 197 females (65,7%) and 103 males (34.3%); the most common age group was 30s with 83 respondents (27,7%), followed by 40s with 74 respondents (24,7%), 20s with 71 respondents (23,7%), teens with 38 respondents (12,7%), and 50s and older with 34 respondents (11.3%); and the most common occupation was office employee with 64 respondents (21.3%), followed by service employee with 59 respondents (19.7%), businessman/businesswoman with 53 respondents (17,7%), specialized professional with 52 respondents (17.3%), housewife with 38 respondents (12,7%), student with 26 respondents (8.7%), and other with 8 respondents (2,7%).

Country	Indonesia	Philippines	Singapore	Malaysia	Thailand	Vietnam	Total
Sample Size	59	62	31	28	41	79	300
Gender							
Male	18	19	7	8	17	34	103
Female	41	43	24	20	24	45	197
Age							
10~20	7	10	3	4	8	6	38
20~30	16	17	9	8	9	12	71
30~40	18	21	6	8	10	20	83
40~50	11	8	6	5	12	32	74
↑ 50	7	6	7	3	2	9	34

Table 1. General Characteristics of the Sample

2. Exploratory Factor Analysis and Reliability Test

In this study, exploratory factor analysis and reliability test were conducted to establish a structural relationship between measured variables and to test the validity and reliability of the measurement items, and the results are as shown in Table 1.

First, an exploratory factor analysis was carried out to test the validity of the measurement items. Principal component analysis was performed as a factor extraction method, and then a varimax rotation was carried out.

The KMO (Kaiser-Meyer-Olkin) value, which indicates the appropriateness of the number of variables and the number of samples, is usually considered very good if it is at least .90, fairly good if it is at least .80, moderate if it at least .70, ordinary if it is at least .60, and unacceptable if it is less than .60 (Tabachnick and Fidell, 2007). Bartlett's test of sphericity was also conducted to confirm the fit of the factor analysis model, and it can be deemed appropriate if the probability of significance is less than .05 (Bartlett, 1965). Since the KMO value was found to be .886, the value of chi-square based on Bartlett's test was 3,553.310, and the significance probability was less than .001, the sample fit and the factor analysis model fit were verified. In addition, since the cumulative variance was 76.414%, which was more than 60%, the extracted factors were confirmed to have sufficient explanatory power.

Next, a reliability test was carried out to test the internal consistency of the measurement items. Reliability was checked by calculating Cronbach's alpha coefficient. If it is more than .7, it can be considered to have no problem in reliability, and it is thus deemed to have internal consistency. Cronbach's alpha coefficient was at least .7 for all measured variables, thus proving the reliability of the measurement items.

3. Confirmatory Factor Analysis

In this study, a confirmatory factor analysis was performed to statistically test the structural relationship between measured variables and to evaluate overall construct validity.

Table 2, nesults 0		narysis ar		iiity				
Variables	Items	1	2	3	4	5	6	7
Medical	MEX2	.815	.125	.227	.211	.175	.034	.231
Expertise	MEX3	.768	.164	.344	.159	.133	.084	.200
(MEX)	MEX1	.765	.112	.290	.230	.191	.099	.164
Administrative	ACO3	.246	.823	.111	.043	.134	.184	.078
Convenience	ACO1	.139	.807	.096	.075	.141	.189	.119
(ACO)	ACO2	032	.798	.146	.088	.206	.097	.178
Physical	PEN3	.161	.136	.852	.143	010	.108	.088
Environment	PEN1	.196	.095	.808	.235	.004	028	.165
(PEN)	PEN2	.306	.115	.721	.041	.154	.019	.108
Visit	VIN1	.102	.021	.224	.817	.151	015	.205
Intention	VIN2	.212	.141	.053	.786	.204	.129	.044
(VIN)	VIN3	.194	.061	.173	.785	.166	.194	.149
Sociocultural Attitudes	SAA3	.137	.090	.129	.107	.800	.101	.071
towards	SAA2	.133	.204	.041	.255	.777	.194	.108
Appearance (SAA)	SAA1	.140	.206	040	.174	.756	.148	.205
Attractiveness	ACE2	.034	.167	.006	.056	.190	.882	.116
of Celebrity	ACE3	.044	.163	.046	.130	.214	.859	.096
(ACE)	ACE1	.264	.347	.105	.187	036	.531	.353
Attitudes	AMT3	.212	.042	.249	.165	.138	.022	.753
towards Cosmetic	AMT2	.130	.265	.109	.103	.204	.235	.731
Medical Tourism (AMT)	AMT1	.365	.230	.060	.218	.117	.261	.568

Table 2. Results of Factor Analysis and Reliability

First, in order to test the convergent validity, the standardization coefficient was measured, and the average variance extraction value and conceptual reliability value were calculated. Normally, if the standardization coefficient is at least .5, the average variance extraction value is at least .5, and the concept reliability value is at least .7, it can be deemed that there is convergent validity. As shown in Table 2, since the standardization coefficient for each measurement item, the average variance extraction value, and the concept reliability value were at least .5, .5, and .7, respectively, the convergent validity of the measured variables was verified.

Next, in order to test the discriminant validity, the coefficient of correlation between the constructs and the square root of the average variance extraction value were compared. If the square root of the average variance extraction value is greater than the coefficient of correlation between the constructs,

Variables	Items	В	β	Cronbach's α	S.E.	t-value	AVE	CR
Attractivenes	ACE3	1.000	.861		_	-		
of Celebrity	ACE2	.953	.865	.902	.062	15.433	.618	.825
(ACE)	ACE1	.719	.603		.067	10.721		
Physical	PEN3	1.000	.820		-	-		
Environment	PEN2	.834	.693	.841	.069	12.105	.619	.829
(PEN)	PEN1	1.054	.839		.073	14.472		
Medical	MEX3	1.000	.870		-	-		
Expertise	MEX2	.926	.888	.823	.046	20.260	.758	.904
(MEX)	MEX1	.900	.854		.047	19.062		
Administrative	ACO3	1.000	.851		-	-		
Convenience	ACO2	.900	.734	.835	.067	13.407	.645	.844
(ACO)	ACO1	1.009	.819		.067	14.994		
Sociocultural	SAA3	1.000	.666		-	-		
Attitudes towards	SAA2	1.190	.874	.815	.099	11.971	.615	.825
Appearance (SAA)	SAA1	1.031	.798		.089	11.520		
Attitudes towards	AMT3	1.000	.634		-	-		
Cosmetic Medical	AMT2	1.179	.739	.804	.118	9.977	.507	.754
Tourism (AMT)	AMT1	1.266	.756		.125	10.126		
Visit	VIN3	1.000	.845		-	-		
Intention	VIN2	1.041	.789	.751	.073	14.247	.633	.838
(VIN)	VIN1	.967	.750		.072	13.514		

Table 3. Results of Confirmatory Factor Analysis

it can be deemed that there is discriminant validity between the two objects. As shown in Table 3, the square root of the average variance extraction value was larger than the coefficient of correlation between the constructs, based on which it was determined that there was discriminant validity.

4. Analysis of Research Model and Testing of Hypotheses

In order to assess the fit of the research

model, the goodness-of-fit index was reviewed based on the chi-square value divided by the degree of freedom (CMIN(\varkappa 2)/df), root mean (square) residual (RM(S)R), root mean square error of approximation (RMSEA), adjusted goodness-of-fit index (AGFI), goodness-of-fit index (GFI), parsimonious goodness-of-fit index (PGFI), normed fit index (NFI), relative fit index (RFI), incremental fit index (IFI), comparative fit index (CFI), Tucker-Lewis index (TLI), parsimonious normed fit index (PNFI), and

	Correlation of Matrix						
	1	2	3	4	5	6	7
1. Attractiveness of Celebrity (ACE)	.786						
 Physical Environment (PEN) 	.099* (.001)	.787					
 Medical Expertise (MEX) 	.193* (.037)	.504* (.254)	.871				
4. Administrative Convenience (ACO)	.226* (.051)	.202* (.041)	.283* (.080)	.803			
 Sociocultural Attitudes towards Appearance (SAA) 	.179* (.032)	.108* (.012)	.242* (.059)	.191* (.036)	.784		
 Attitudes towards Cosmetic Medical Tourism (AMT) 	.183* (.033)	.201* (.040)	.324* (.105)	.146* (.021)	.149* (.022)	.712	
7. Visit Intention (VIN)	.167* (.027)	.270* (.073)	.181* (.033)	.196* (.038)	.200* (.040)	.368* (.135)	.796

Table 4. Results of Discrimination Validity

Notes: 1. *p< .01

2. Diagonal Line=

3. The square values of correlation coefficient are provided in parentheses.

parsimonious comparative fit index (PCFI). If the value obtained by dividing the chi-squared value by degrees of freedom is less than 3, it is judged as a good fit (Wang Ji-chuan and Wang Xiao-gian, 2019). If RM(S)R is .05 or less, it can be judged as a good fit (Hong Se-Hee, 2000). If RMSEA is .05 or less, it is a good fit; if it is .08 or less, it is a moderate fit; if it is .10 or less, it is an ordinary fit; and if it exceeds .10, it is a poor fit (Kang Hyun-Cheol, 2013). AGFI of .85 or more, GFI of .90 or more, and PGFI of greater than .60 indicate a good fit (Hong Se-Hee, 2000). NFI, RFI, IFI, CFI, and TLI of .90 or higher indicates a good fit (Kang Hyun-Cheol, 2013; Tucker and Lewis, 1973). PNFI of greater than .60 (Kang Hyun-Cheol, 2013) and PCFI of .75 or more indicate a good fit (Mulaik et al., 1989). As shown in Table 4, the chi-squared value was 411,732, degree of freedom was 179, probability of

significance was .000, the value obtained by dividing the chi-squared value by the degree of freedom was 2.380, RM(S)R was .052, RMSEA was .068, AGFI was .848, GFI was .886, PGFI was .663, NFI was .889, RFI was .865, IFI was .932, CFI was .931, TLI was .917, PNFI was .732, PCFI was .767. Based on these results, it can be said that the research model demonstrated goodness of fit.

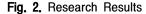
Structural equation path analysis was performed to test the hypotheses, and the results were as shown in Fig. 2.

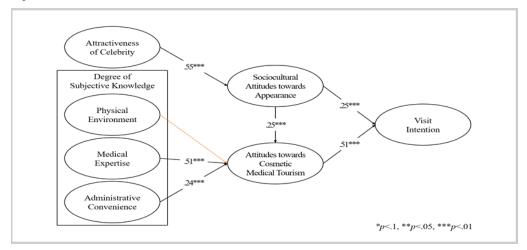
First, the attractiveness of celebrities $(t=4.162, p \langle .01 \rangle)$ was shown to have a positive effect on sociocultural attitudes towards appearance, thus supporting H1.

Also, the subjective knowledge of the medical expertise in cosmetic medical tourism (t=4.162, $p \langle .01 \rangle$ and the subjective knowledge of the administrative convenience in cosmetic medical tourism (t=4.162, $p \langle .01 \rangle$

Index	Indicators	t-value	Res	ults
	x2	-	458.089	
	df	-	176	-
	р	< .05	.000	
	CMIN($\chi 2$)/df (Normed $\chi 2$)	< 3.00	2.603	0
Absolute Fit Index	RM(S)R	≤ .05	.067	Close
Index	RMSEA	≤ .08	.073	0
	AGFI	≥ .85	.836	Close
	GFI	≥ .90	.875	Close
	PGFI	> .60	.667	0
	NFI	≥ .90	.874	Close
	RFI	≥ .90	.850	Close
Incremental Fit Index	IFI	≥ .90	.919	0
Index	CFI	≥ .90	.918	0
	TLI	≥ .90	.902	0
Parsimonious	PNFI	> .60	.733	0
Fit Index	PCFI	≥ .75	.769	0

Table 5. Results of Model Fit Analysis





were shown to have a positive effect on attitudes towards cosmetic medical tourism, but the subjective knowledge of the physical environment of cosmetic medical tourism did not have a significant effect on attitudes towards cosmetic medical tourism. Thus, H3 and H4 were supported, but H2 was rejected.

Next, sociocultural attitudes towards appearance (t=5.573, $p \langle .01 \rangle$ were found to have a positive effect on attitudes towards cosmetic

Н	Paths		Path Coefficient p-value		ue	Results	
H1	ACE	\rightarrow	SAA	.55	7.552	***	Accepted
H2	PEN	\rightarrow	AMT	.09	1.147		Rejected
H3	MEX	\rightarrow	AMT	.51	5.727	***	Accepted
H4	ACO	\rightarrow	AMT	.24	3.568	***	Accepted
H5	SAA	\rightarrow	AMT	.25	3.980	***	Accepted
H6	SAA	\rightarrow	VIN	.25	3.653	***	Accepted
H7	AMT	\rightarrow	VIN	.51	6.374	***	Accepted

Table 6. Results of Hypothesis Test

Note: *p(.1, **p(.05, ***p(.01

medical tourism, and thus H5 was supported.

Lastly, sociocultural attitudes towards appearance (t=2.680, p $\langle .01 \rangle$) and attitudes towards cosmetic medical tourism (t=6.527, p $\langle .01 \rangle$) were found to have a positive effect on the visit intention, and attitudes towards cosmetic medical tourism were found to have a stronger impact than sociocultural attitudes towards appearance. Thus, H6 and H7 were supported.

Six of the seven hypotheses in total were supported, while one hypothesis was rejected. The results of testing the hypotheses in this study are shown in Table 5.

V. Conclusion

The results of this study showed that in the case of people from Southeast Asia who visit foreign countries for cosmetic medical tourism, they experienced satisfaction and appeal in relation to the advanced cosmetic surgery technology, expertise of medical staff, staff qualification, satisfaction with and accessibility of hospitals, convenience of the medical care system, and administrative convenience such as communication. It was found that these factors led to the intention to visit another country for cosmetic medical tourism. In addition, as a process of developing a visit intention, a certain part of the sociocultural attitudes towards appearance was formed according to the appearance and attractiveness of celebrities from the destination country in question, and this improved the attitudes towards cosmetic medical tourism and in turn affected the visit intention.

Previous studies have shown that the reasons for choosing medical tourism were the excellent medical technology boasted by destination country due to the the advancement of cosmetic surgery technology, the level of fame of the medical staff at the medical institution in question, and the state-of-the-art medical equipment and facilities (Korea Tourism Organization, 2013). In recent years, however, countries all over the world have been trying to take a chunk of the cosmetic medical tourism market by making substantial investments in medical facilities and equipment, and because most countries offer advanced medical facilities and equipment of similar levels, medical tourists no longer consider it an appeal factor. This further proves that in the

cosmetic medical tourism market, it is now difficult to attract customers based on the quality of medical facilities and equipment alone.

Another finding in this study was that sociocultural attitudes towards appearance influence the intention of and attitudes towards visiting another country for cosmetic surgery. In other words, it was found that there was positive correlation between the level of interest in appearance and the visit intention and attitudes towards cosmetic medical tourism. Accordingly, in order to promote cosmetic medical tourism in the future, it may be necessary to provide selective information to tourists according to their sociocultural attitudes towards appearance and newly explore different strategies of attracting customers according to their level of interest in appearance. In particular, a close relationship between celebrities and sociocultural attitudes towards appearance appear was apparent, based on which it is expected that it is possible to establish a promotion and marketing strategy for cosmetic medical tourism using domestic

celebrities who are popular abroad.

As a practical contribution made by this study, it has laid the cornerstone for seeking measures to preemptively occupy the cosmetic medical tourism market, which is creating high added value and undergoing rapid growth with a large number of potential customers from not only China and Japan but also the ASEAN region. An academic contribution made by this study is that it attempted to discover a new type of correlation between the attitudes towards celebrities and sociocultural attitudes towards appearance by taking into consideration visit intention, which is a behavioral intention.

On the other hand, one limitation of this study is that an online survey was conducted, as it was difficult to carry out in-person surveys with consumers living in the ASEAN region. Because the respondents who participated in the survey comprised the actual sample of this study, there was no problem in collecting data, but due to the online survey sample being limited to that of an offline, there could have been a non-coverage error and self-selection error.

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